DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION

Form Approved: OMB N0. 0910-0	030. Expiration Date:	January 31, 2000.	See Reverse.
TYPE OF SUBMISSION:	ORIGINAL AMENDED	□ DISC □	☐ BASE
FOR FDA LISE	ONLY ON ORIGINA	SUBMISS	IONS
FOR FDA USE	ONLY ON ORIGINAL		IONS

	WASHINGTON, DC 20204	TYPE OF SUBMISSION:					
COSME	COSMETIC PRODUCT INGREDIENT STATEMENT FOR FDA USE ONLY ON ORIGINAL SUBMISSIONS					BMISSIONS	
(In accordance with 21 CFR 720)			FDA CPIS NO.		FILING DATE	FILING DATE	
Read Instructi	ion Booklet Before Completing. Type entries in CAPITAL LE	ETTERS.	·				
NOTE: This re	eport is authorized by Public Law 21 U.S.C. 371(a); 21 CFI voluntary program comprehensive, accurate, and timely.	R 720. Whil	le you are not required to	respond,	your cooperation is need	ded to make the results	
01. NAME OF	F MANUFACTURER / PACKER / DISTRIBUTOR (On Label)		11. NAME OF MANUFAC	TURER	/ PACKER (Private Labele	er)	
02. KIND OF	BUSINESS $\square \stackrel{MF}{R} \qquad \square \stackrel{PK}{R} \qquad \square \; DISTR$						
03. NAME OF	F PARENT COMPANY (If any)		12. NAME OF PARENT C	OMPAN	Y (If any)		
04. COMPLE	TE MAILING ADDRESS:		13. COMPLETE MAILING	ADDRE	SS:		
	STATEMENT FILED BY COMPANY 01 OR COMPANY 11?		15. PRODUCT CATEGOR	RY COD	E:		
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BRAND NO.	16. BRAND NAME OF COSMETIC PRODUCT				17. TYPE OF ACTION	18. DATE OF ACTION	
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19. TYPE NA	ME AND TITLE OF AUTHORIZED INDIVIDUAL	20. TELE	PHONE NO.	21. S	IGNATURE AND DATE		
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FORM FDA 2512 (2/97) CONTINUE COSMETIC PRODUCT INGREDIENT STATEMENT ON FORM FDA 2512a

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:

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DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION

Form Approved: OMB N0. 09	Expiration Date: December 31, 2000. See Reverse.				
TYPE OF SUBMISSION:	ORIGINAL	AMENDED	DISC	BASE	
FOR FDA USE ONLY ON ORIGINAL SUBMISSIONS					
FDA CPIS NO.		FILING D	ATE		

WASHINGTON, DC 20204				TYPE OF SUBMISSION: ☐ ORIGINAL ☐ AMENDED ☐ DISC ☐ BASE				
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01. N	AME O	F MANUFACTURER / PACKER / DISTRIBUTOR (On Label)		11. NAME OF MANUFAC	TURER	/ PACKER (Private Labele	er)	
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FORM FDA 2512 (2/97) CONTINUE COSMETIC PRODUCT INGREDIENT STATEMENT ON FORM FDA 2512a

DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION WASHINGTON, DC 20204

TYPE OF SUBMISSION:	☐ ORIGINAL	☐ AMENDED	☐ DISC	BASE

Expiration Date: December 31, 2000. See Reverse.

Form Approved: OMB No. 0910-0030.

COSM	ETIC PRODUCT INGREDIENT STATEME	MENT FOR FDA USE ONLY ON ORIGINAL SUBMISS			BMISSIONS	
(In accordance with 21 CFR 720)			FDA CPIS NO.		FILING DATE	
Read Instruction Booklet Before Completing. Type entries in CAPITAL LETTERS.			F		.	
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04. COMPL	ETE MAILING ADDRESS:		13. COMPLETE MAILING	ADDRESS:		
	STATEMENT FILED BY COMPANY 01 OR COMPANY 11? check one)		15. PRODUCT CATEGOR	RY CODE:		
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